

AIDSCOM

***Malawi
Implementation
Plan***

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AIDS Public Health
Communication Project
(AIDSCOM)

August 1991

AIDSCOM
Project No. 936-5972
AIDS Technical Support:
Public Health Communication Component
Contract No. DPE-5972-Z-00-7070-00

Office of Education, Health, and Population
Bureau for Science and Technology
Agency for International Development

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Abbreviations

AED	Academy for Educational Development
CCAM	Malawi National Women's Organization
EEC	European Economic Community
GOM	Government of Malawi
HEU	Health Education Unit
HIV	Human Immunodeficiency Virus
IEC	Information, Education, and Communication
KABP	Knowledge, Attitudes, Beliefs, and Practices (survey)
MOH	Ministry of Health
NGO	Non-governmental Organization
STD	Sexually Transmitted Disease
TA	Technical Assistance
USAID	United States Agency for International Development
WHO/GPA	World Health Organization/Global Programme on AIDS

Malawi Implementation Plan

I. AIDSCOM Project Background

In 1987, the United States Agency for International Development (USAID) initiated a new project to develop research communications for AIDS prevention. The Academy for Educational Development (AED) received the contract to implement the project under contract number DPE-5972-Z-00-7070-00, AIDS Technical Support: Public Health Communication Component (AIDSCOM). The Academy's partners in this endeavor are The Johns Hopkins University, Porter/Novelli, the University of Pennsylvania/Annenberg School of Communications, and the Prism Dae Corporation.

AIDSCOM is an initiative of the Offices of Education, Health, and Population of the Bureau for Science and Technology, its regional bureaus and country USAID Missions to assist National AIDS Committees in their fight against AIDS. This project builds upon USAID's successful experience with social marketing and public health communication to create a model uniquely suited to the needs of AIDS prevention in a country-specific context. AIDSCOM works closely with AIDSTECH, USAID's program of general technical support, to complement the World Health Organization's leadership in global AIDS prevention and control.

AIDSCOM is primarily an operations research and communications project led by professionals who have worked on AIDS since the early days of the worldwide pandemic.

The purpose of AIDSCOM is to develop and demonstrate effective public health communication strategies and methods for the control and prevention of AIDS the developing world. AIDSCOM applies and further develops the use of public communication strategies, prevention counseling approaches, and condom marketing methods to inform people about HIV infection, how it is and is not spread, and to understand, motivate, and support the process of adopting specific risk reduction behaviors to prevent the further spread of HIV infection.

II. Malawi Project Background

A. Overview of HIV/AIDS in Malawi

The first case of AIDS in Malawi was diagnosed in 1985. By the end of October 1990, 12,074 confirmed cases had been reported to the Ministry of Health (MOH). By August 1991, the cumulative total of AIDS cases diagnosed since 1985 probably will be near 20,000. Of these, about half will have died.

Seroprevalence in urban areas is estimated to be 20 percent among adults older than 15 years. The infection rate in rural areas is estimated to be 8 percent, for a national average of 9.6 percent. Projecting from these estimates, approximately 400,000 Malawians are infected with HIV. Men and women are infected at equal rates. The high incidence of sexually transmitted diseases (STDs) in Malawi is a major factor that contributes to the rapid spread of HIV infection.

HIV/AIDS is already having considerable impact on Malawi's health services. An estimated 20–40 percent of adult urban in-patients are suffering from HIV-related illnesses. Mortality among children younger than five years in one urban center has increased from 151:1000 to 167:1000 due to HIV infection. Those children born of infected mothers, but not themselves infected, will be orphans within ten years. By 2000, Malawi will have an estimated 282,000 to 361,000 AIDS orphans.

Alarm over the loss of skilled workers because of AIDS has prompted the private sector to ask for help in establishing AIDS education programs in the workplace. Some government officials are publicly recognizing and warning of the potential negative impact of HIV/AIDS on Malawi's development.

B. Rationale for the Project

The Government of Malawi (GOM) recognizes the serious threat posed by HIV/AIDS. Soon after the first cases of AIDS were diagnosed in 1985, control activities were planned and implementation begun. The four major objectives of the Malawi National AIDS Control Program are to:

1. prevent further HIV transmission;
2. reduce the morbidity and mortality associated with HIV infection;
3. reduce the impact of AIDS and HIV infection on individuals, families, and society;

4. obtain regular information on the status of the epidemic and monitor the efficacy of the various control interventions.

The first phase of control activities, from January 1986 to December 1988, included establishing a National AIDS Committee; expanding HIV screening capability; briefing government leaders and health workers on HIV/AIDS; initiating HIV/AIDS Information, Education, and Communication (IEC) activities for the general public; and collecting baseline epidemiologic information to determine the extent of the epidemic.

A five-year, medium-term, AIDS control plan was approved in late 1988. Four WHO/GPA staff were assigned to the newly-established AIDS Secretariat that was created to coordinate AIDS control activities. The staff members were an epidemiologist/team leader, an administrator/technical officer, an IEC specialist, and a laboratory specialist.

Based on experience from the first year, planning called for greater decentralization of HIV/AIDS control activities to the regional and district levels; an increase in IEC activities, particularly communication aimed at targeted audiences such as bar girls, lorry drivers, STD patients, and in- and out-of-school youth; expanded counseling training; and identification and solicitation of groups such as CCAM (the Malawi national women's organization) to assist with educational programs and to encourage HIV testing.

The GOM recognized the importance of HIV/AIDS education for school-aged young people. Its interest led to developing curriculum materials for use throughout the Malawi school system. This has been the primary AIDSCOM activity in the country.

Considerable progress has been made toward facing the myriad issues necessary to launch an HIV/AIDS prevention campaign in Malawi; a country in which there are many cultural and religious constraints related to discussing sexuality, disease, and death. For example, a Ministry of Health (MOH) study of secondary school students in Mzimba District, prompted by the AIDS Education in the Schools Project, concluded in November 1990:

"... that three out of five school teenagers accept the use of a condom as a means of preventing the spread of HIV transmission and AIDS. We, therefore, recommend the promotion of the use of a condom in the overall strategy of combating this disease."

Such a study and such a conclusion would never have been possible two years ago, before the widespread public knowledge of the disease and its impact on individuals, families, and communities.

C. Project Objectives

AIDSCOM's objective in Malawi is to support the AIDS control efforts of the National AIDS Control program, particularly in respect to planning, disseminating, and evaluating educational messages to targeted audiences and the general public. The following tasks were specified as the means of providing this support.

1. Study target audiences and, based on focus group findings and interviews of students, teachers, and parents, develop culturally sensitive curriculum materials and lesson plans for implementation in Malawi's public and private schools.
2. Facilitate the integration of AIDS education into existing pre-service and in-service teacher training courses; public and private school education programs at all levels (including primary, secondary, and tertiary); school curricula; and materials and media. Specifically, AIDSCOM will:
 - facilitate field testing and finalization of teachers' guides and students' manuals concerning HIV/AIDS,
 - train teachers to use these teaching materials, and
 - establish mechanisms for monitoring and revising education programs as necessary.
3. Help plan, coordinate, monitor, implement, and evaluate pre-service and in-service HIV/AIDS and STD training programs for health workers (including paramedical staff, nursing staff, physicians, etc.) and workers in other public sectors who can add AIDS IEC to their responsibilities. And, to work to ensure that AIDS/STD training components are integrated into existing pre-service and in-service training programs.
4. Serve as a resource for designing, implementing, and evaluating prevention counseling training programs in the public and private sector.
5. Help the USAID/Malawi Health Office with the coordination and logistical management of USAID-funded AIDS control activities implemented by the AIDSCOM and AIDSTECH Projects. Assist the MOH and the Health Education Unit to plan, implement, and evaluate IEC activities funded by USAID through the PHICS Project.
6. Report on a daily basis to the Chief of the Health Education Unit.

Work with a variety of GOM and technical consultant staff, including staffs of the AIDS Control Program, the MOH training and health

manpower planning units, and the Ministry of Education, and with long-term advisors from the World Health Organization (WHO), European Economic Community (EEC), and Project HOPE.

Keep the USAID/Malawi Health Officer informed through periodic reports and briefings and comply with AED/AIDSCOM program and financial reporting requirements. Help the USAID/Malawi Health Office prepare reports related to USAID support for AIDS control activities in Malawi.

D. Collaborating Institutions and Organizations

Donor organizations that collaborate with AIDSCOM include WHO, UNICEF, UNDP, EEC, and the World Bank. UNICEF is participating directly in preparing the AIDS curriculum materials for schools. The Ministries of Health, Education, and Culture and Community Services also support the schools initiative. Collaboration is coordinated through the AIDS Secretariat. The U.S. Peace Corps contributes to AIDSCOM through providing a graphics specialist, who is assigned to the Health Education Unit (HEU) in which the AIDSCOM resident advisor is based.

In addition, and key to the success of this intervention, has been the active collaboration with AIDSCOM of various religious institutions in Malawi, including representatives of the Catholic, Baptist, Seventh-Day Adventist, Presbyterian, Methodist, and Muslim faiths. It was imperative to have such groups represented at each stage in developing the schools-based project in order to minimize resistance during implementation. Religious institutions have made valuable contributions throughout the activity.

E. Constraints

Given the lack of medical solutions to the spread of HIV infection, it is widely recognized that education that leads to behavioral modification is the only effective weapon for minimizing the impact of the AIDS epidemic. The major constraint to reducing HIV transmission is the often-cited difficulty in changing behaviors of any kind, including the high risk behaviors associated with the spread of the HIV. Historical, cultural, religious, and economic factors all play a role. Despite that awareness of HIV/AIDS and its modes of transmission is high in Malawi, the epidemic continues. All communication strategies must accept that knowing what to do does not guarantee actions which reflect that knowledge.

Because sexual behavior is so private a matter, it is difficult to be sure the information that is obtained through evaluation instruments is accurate, especially if the data are self-reported. This constraint can be partially overcome by persuading subjects that rigid controls will protect their anonymity.

A further constraint on AIDS education, particularly AIDS education in schools, is the reluctance of Malâwian parents, teachers, and school administrators to discuss sexual matters with their children and, by extension, with students in the classroom. Communication strategies must include components designed to foster cultural change that allows freer and less self-conscious discussion of sex. Target audiences for this message must include political and religious groups.

Some Malâwians fear that freely discussing sex and related subjects such as using condoms will promote sexual promiscuity among the young. This widespread and frequently-voiced concern must be taken into account. Arguments must be made that:

- young people will be sexually active with or without discussing these issues,
- condoms are not currently being distributed to school children as part of any AIDS education program, and
- information can help those who are sexually active to reduce HIV and STD infection and teenage pregnancy.

Other constraints that will influence AIDSCOM's success include: a paucity of mass media channels, limited literacy, underdeveloped health infrastructure, chronic shortages of resources and personnel, poverty, and limited educational opportunities. In Malâwi, these constraints are somewhat mitigated by the willingness of donor organizations to invest substantially in the AIDS control program and the high priority given AIDS education by the GOM.

F. AIDSCOM Activities to Date

Several short-term technical assistance (TA) visits were made to Malâwi beginning in 1989, before the AIDSCOM resident advisor arrived. The consultants helped the National AIDS Control Program design a comprehensive AIDS control strategy, provided TA for planning and organizing national conferences on AIDS, helped design, produce, and test AIDS IEC materials, and began to develop AIDS materials for schools.

In January 1989, Dr. John David Dupree, AIDSCOM/AED, helped the AIDS Control Program Manager revise the Medium-Term Plan. During these

deliberations, Dupree recommended that a national symposium be held to bring the National AIDS Committee together to discuss the policy constraints to implementing a comprehensive, national AIDS prevention campaign.

Dupree and Mr. Dennis Weeks, an AIDSCOM/JHU consultant, visited Malawi in April 1989 to follow up this recommendation by helping plan, conduct, finance, and evaluate the First Symposium on AIDS for the National AIDS Committee; to assist with an IEC/Materials workshop on AIDS prevention for artists, writers, and materials designers; and to help plan the first materials development workshop on AIDS education for schools.

Dupree returned to Malawi in June 1989 to help arrange for the schools materials development workshop and to help USAID/Malawi and the AIDS Control Program conduct the Resource Mobilization Meeting for the Medium-term Plan for AIDS Prevention and Control, June 29–30, 1989.

In late October 1989, Dupree provided TA for a two-week workshop on developing materials for AIDS education in Malawi schools. Results included first-drafts of pupils' handbooks and teachers' guides. A second workshop to complete and refine the materials was held in February 1990, again led by AIDSCOM staff.

Meanwhile, Dr. Susan McCombie of the Annenberg School of Communication, an AIDSCOM subcontractor, visited Malawi in September 1989 to help implement a nationwide AIDS knowledge, attitudes, beliefs, and practices (KABP) survey conducted by Dr. Paul Kishindo of Chancellor College in Zomba. McCombie also helped pre-test and revise the questionnaire and train interviewers.

Dr. Mervyn Silverman, an AIDSCOM consultant, was in Malawi in March 1990 to participate in the Medical Association of Malawi Conference on AIDS and to consult with groups involved in AIDS prevention and education.

The AIDSCOM resident advisor, Dr. William E. Mackie, arrived in Malawi in November 1990 to begin a two-year assignment. His office is located at the HEU in Lilongwe. Activities to date have been concentrated in the following areas.

1. AIDS Materials for Public and Private Schools

Immediately upon arrival, the resident advisor began working with the drafting committee that was preparing pupils' guides and teachers' handbooks on AIDS. The final drafting workshop was held December 20–23, 1990 in Lilongwe. More than 30 representatives of the government, religious groups,

and the donor community participated. During the workshop, led by the AIDSCOM advisor, the committee completed the texts, revised graphics, and planned field testing.

The advisor supervised the editing of the revised drafts and arranged to have all materials entered on computer in a single software format. New copies of all books were produced and duplicated in sufficient numbers for field testing.

Preparations for field testing began with a two-day workshop in April 1991, during which resource persons were trained to use the new curriculum materials. These resource people then trained teachers in each of the three regions. Multiple copies of pupils' books were carried by the teachers to their schools for the teaching/evaluation phase. Data collectors/interviewers visited the 19 test sites in May 1991 to administer pre- and post-tests to students, collect questionnaires from teachers, observe classroom teaching of the materials, and interview teachers.

A draft report of the field testing was presented to the AIDSCOM advisor and AIDS Secretariat in June 1991, and the final report in mid-July. Work on the extensive changes recommended in the report began immediately and continued through August 1991. All books will be prepared as camera ready materials by the advisor. Bids from printers were solicited in August 1991. More than 200,000 books will be required for the first school year.

The curriculum project will be formally launched in December 1991. District Inspectors of Schools will be trained during three workshops in December. The District Inspectors will then train teachers in their regions as part of on-going in-service teacher training activities. Beginning in January 1992, the AIDS curriculum will be taught throughout the Malawi public and private school systems.

2. PHICS Activities

The arrival of the AIDSCOM advisor coincided with providing commodities to the HEU. Mackie was asked to help install new computer systems and resolve problems relating to the supply of audio equipment and musical instruments in the media production unit. A major task was to arrange for the compatibility and interface of the various PHICS units. He provided training in equipment operation and maintenance, including lessons on how to operate some of the musical instruments that were supplied. He also trained personnel in the production of slide-tape presentations and video script writing.

Additional tasks include helping design monitoring/inventory systems for the graphics and radio sections and helping to plan the remodeling/renovation of

HEU premises. Mackie has also helped HEU prepare documentation for USAID and plan participant training for HEU personnel.

3. Cooperative AIDS/IEC Activities with the AIDS Secretariat

The AIDSCOM advisor serves as a resource person for a variety of workshops and seminars, including those dealing with AIDS counseling, video script writing, AIDS in the workplace, and AIDS orientations for such groups as the League of Malawi Women. Mackie was a resource person for the 1991 Choral Workshop, sponsored by the University of Malawi in Zomba, which focused on the musical arts as a tool for disseminating AIDS messages. He produced a video tape of the final concert, which included the prize-winning AIDS songs.

Mackie is a co-editor of the AIDS Newsletter that is published quarterly by the AIDS Secretariat and he advises the Secretariat on matters relating to audio-visual equipment and presentations, including the preparation of audio tapes of AIDS songs and jingles for distribution to district health centers.

The advisor also attends all IEC-related meetings of the AIDS Secretariat and participates in the coordination of AIDS education activities among USAID, UNICEF, WHO, EEC, and other donors.

III. Communications Plan

The advisor's first task is to ensure that planning for the drafting, testing, production, and distribution of AIDS curriculum materials is complete and that all activities are timed to ensure that teachers are trained and books are available in Malawi's schools by no later than January 1992. This will be accomplished through workshops, training sessions, meetings, planning sessions, and conferences with public/private teachers and school administrators and representatives of the government and the donor community, including USAID/Malawi and the AIDS Secretariat.

An equally important task will be to design systems to monitor and report the impact of the AIDS materials for schools intervention. Monitoring will allow for modifications in the pedagogical approach and revision of the materials based upon experience gained while teaching the curriculum. The need for timely feedback will be critical, because there are few opportunities during the school year during which the program will have access to teachers and administrators for training.

When teaching about HIV/AIDS begins in early 1992, site visits will be scheduled for direct classroom observation by evaluators. A more formal evaluation will be conducted later in the year. It will include testing of students and interviews with teachers. Indirect measures, such as changes in STD infection rates among students, changing patterns of condom consumption, surveys of sexual practices, and other appropriate studies will be identified and used.

An important adjunct to the AIDS education in schools project will be to design and produce audio-visual materials about HIV/AIDS, such as posters, photographs, pamphlets, graphs, charts, cartoon booklets, news clippings, cassette tapes, etc., to supplement the meager or nonexistent resources presently found in many Malawi classrooms.

Ways will be sought to extend the impact of the AIDS curriculum materials to out-of-school youth. This will be done by distributing selected materials to youth clubs, church groups, drama clubs, community organizations, the Malawi Young Pioneers, the League of Malawi Women, and through other appropriate channels. Videos targeted at young adults will be produced and shown in schools, to groups serving out-of-school youth, and to rural audiences via mobile video/cinema vans operated by the Department of Information and the Extension Aids Branch. Some videos may be broadcast on television.

School radio programs based on the AIDS curriculum materials will be recorded and broadcast as an additional means of increasing the reach and multiplying the impact of the intervention. Jingles and songs about AIDS, both general and targeted, will also be produced in cooperation with the AIDS Secretariat and the Malawi Broadcasting Corporation.

Communication strategies for Malawi must take into account the paucity of channels for reaching rural audiences. Radio, along with interpersonal channels, represent the best means for reaching rural people. The advisor will encourage the Health Education Radio Section to increase its output of AIDS-related programming and will consult with the Malawi Broadcasting Corporation about increasing its coverage of AIDS-related events.

A pilot project will be designed to use short audio dramas and music that contain messages about AIDS and STDs for playback in hospital/clinic waiting rooms. This might be a low-cost means of reaching urban and non-urban audiences. Pending an evaluation, this project may be extended nationwide.

Because several donor-funded specialists work through the AIDS Secretariat to provide prevention counseling training, the AIDSCOM advisor will concentrate on designing, producing, and evaluating teaching aids and mass

media materials to support the existing counseling programs. Particular emphasis will be directed toward creating materials to help inaugurate and sustain AIDS in the workplace training activities, for which demand is rapidly building. The AIDSCOM advisor will be able to utilize materials and curricula that have been developed by AIDSCOM in Uganda and Tanzania for their AIWP projects.

The AIDSCOM advisor will help coordinate AIDS IEC activities that are part of the PHICS Project, particularly those aspects related to providing and using computer and media hardware. In addition, the advisor will conduct training sessions to ensure that all HEU personnel can operate and maintain all the equipment to be supplied. He also will help design and use systems to facilitate better forward planning, costing, reporting, and evaluation of all HEU activities.

The AIDSCOM advisor will advise and help decentralize health education and will conduct training in health message design, production, and evaluation for newly-recruited District Health Education officers. They will be posted to the field before the end of 1991. Whenever possible, other health workers will be invited to participate in these district-based training programs. Special emphasis will be placed on identifying local resources, such as bands, drama groups, etc., as a means of encouraging increased decentralization and greater use of traditional and face-to-face communication channels. Advanced training in radio and video production and musical performance will be given to HEU staff and selected regional and district personnel during the second year of the advisor's tour.

The AIDSCOM advisor will establish close links with other agencies and donor personnel involved with AIDS/STD education and prevention. He will work closely with the AIDS Secretariat and will participate in all meetings, seminars, workshops, and other activities relating to AIDS IEC in which the Secretariat plays a part. Frequent meetings will be held with USAID/Malawi staff to promote good communication and coordination. A time-based schedule of implementation activities is in Section V.

IV. Institutionalization Strategy

Because of the close cooperation of the Ministry of Education and Culture, the Ministry of Health, and the AIDS Secretariat in the AIDS education initiative, significant institutionalization of the curriculum activity seems probable. The basic materials will have been prepared, and the AIDS Secretariat is willing and able to manage revisions and reprinting of materials with the assistance of USAID and UNICEF, both of which have long-term commitments to AIDS IEC activities. The speed and thoroughness of

institutionalization of the project will be enhanced if AIDSCOM TA is continued beyond the initial year of the intervention, however.

A further impetus for institutionalization comes from the Malawi Congress Party which has been vocal and insistent in its demand for AIDS information for young people. Organizations such as CCAM and church groups are continuing to bring pressure for increased AIDS education, particularly in rural areas. It is assumed that the TA in curriculum and materials development provided by AIDSCOM will assist these NGOs as well as the ministries in replicating the process of this development.

The major inputs required for institutionalization are funds for revising, printing, and distributing books to schools; for continuing and expanding teacher training; and for maintaining evaluation.

Institutionalization of those activities connected with the PHICS Project will be promoted through guiding the training programs undertaken by senior HEU personnel; training HEU personnel at the national, regional, and district levels; and helping design and install systems that require a minimum of management and supervision for planning, costing, producing, distributing, and evaluating health IEC materials.

Because of the high priority assigned to the AIDS education in the schools initiative and the early deadline for implementation, much of the AIDSCOM advisor's time will be devoted to this project for the first 15 months of his 24-month tour. This leaves only a few months of the advisor's tour for full concentration on PHICS-related activities. It is therefore recommended that consideration be given to providing additional TA to HEU beyond the initial two-year contract period.

V. Implementation Schedule

Following is the projected implementation schedule for AIDSCOM activities in Malawi in 1990-1991 (Table 1) and 1991-1992 (Table 2).

Table 1. Projected AIDSCOM/Malawi implementation schedule for 1990-1991.

Activity	1990		1991									
	N	D	J	F	M	A	M	J	J	A	S	O
Advisor arrives at post												
Orientation, meet key personnel												
Draft final AIDS schools manuscripts												
Workshop on slide/ tape production												
Inspect and install commodities from PHICS												
Plan for remodeling/ refurbishing HEU premises												
Revise AIDS schools manuscripts/graphics												
Workshop on AV equipment operation and maintenance												
Reproduce AIDS schools booklets for teacher training and field testing												
Train resource people and teachers for field testing												
Field test materials												
Gather data from field tests												
Draft field test report												
Present final field test report												
Workshop on video script writing												
Final revision of AIDS schools manuscripts												
Prepare materials for printing												

Activity	1990		1991									
	N	D	J	F	M	A	M	J	J	A	S	O
Identify additional commodities needed by HEU from PHICS												
Deliver materials to printers												
Workshop on video budgeting and pre-production												
Plan and arrange for launching AIDS schools project												
Pre-test and revise video script												
Plan training for District Inspectors												

Table 2. Projected AIDSCOM/Malawi implementation schedule for 1991-1992.

Activity	1991		1992									
	N	D	J	F	M	A	M	J	J	A	S	O
Plan and arrange distribution of AIDS booklets to schools												
Workshop on video direction, camera, and sound												
School visits to observe teaching of materials												
Location search, casting, and pre-production for AIDS video												
Launch AIDS Schools Project												
Train District Inspectors of Schools												
Train teachers in each district by Schools Inspectors												
Teach AIDS materials in schools												

Activity	1991		1992									
	N	D	J	F	M	A	M	J	J	A	S	O
Observe teaching at selected sites												
Plan evaluation for first year of project												
Film AIDS video												
Post-production of AIDS video												
Test video first cut												
Complete and copy video												
Evaluate first year of project												
Design and produce materials for teachers' kit supplement to AIDS books												
Plan project year two and beyond												
Teacher training												
Screen and evaluate AIDS video												
Revise and reprint AIDS booklets												
Training to use remodeled HEU studio facilities												
Media production workshops for District Health Education Officers and health workers												
Planning and pre-production for additional AIDS videos												
Distribute AIDS schools materials												
Workshop on advanced radio production												

Activity	1991		1992									
	N	D	J	F	M	A	M	J	J	A	S	O
Workshop on advanced video production												
Draft final report												
Clear and depart post	Nov. 1992											